

ignorance. We, the benefactors of their sacrifice owe them at least that much.

#### THE REPUBLICAN PRESCRIPTION DRUG PROPOSAL

The SPEAKER pro tempore. Under the Speaker's announced policy of January 19, 1999, the gentleman from Ohio (Mr. BROWN) is recognized during morning hour debates for 5 minutes.

Mr. BROWN of Ohio. Mr. Speaker, the last couple of weeks have produced some of the most spectacular propaganda we have seen here in some time. It relates to the Republicans Medicare prescription drug proposal. First PHRMA, the drug industry and prescription drug manufacturers' lobbying group, launched an advertising campaign in the newspaper Roll Call and other papers claiming that a plan like the Republican proposal could cut prices by 30 to 39 percent.

By expressing their exuberant support for this plan and its alleged results, the drug industry as much as said it can comfortably weather price cuts in the 30 to 39 percent price range. If that is the case, the drug industry should do us all a favor and simply make the cuts in price. It is a lot easier than requiring seniors to go into a prescription drug coverage market that does not exist to purchase a stand-alone product that cannot stand alone.

The second wave of rhetoric came yesterday when Chairman THOMAS announced the GOP prescription drug plan which relies on private insurers to offer individual prescription drug coverage saying it would cut prices twice as much as the Democrats Medicare based plan. If only it were true. The Congressional Budget Office said the Republican drug plan may cut costs by 25 percent, not through lower prices but by restricting access to medically necessary drugs.

It is an important division. I will say it again. The Republican plan saves money not by miraculously convincing drug companies to lower their prices but instead by limiting access for senior citizens to medically necessary prescription drugs. It cuts costs by decreasing the value of the prescription drug benefit. The insurers win, the drug companies win, the government wins but senior citizens lose.

The Republican plan gives insurance companies carte blanche to do what they are doing today, that is, put price tags on treatment decisions and deny coverage for medically necessary treatment. Sound familiar? The President's plan is explicit in requiring coverage, on the other hand, for any medically necessary drug prescribed by a doctor, which makes sense given it is the doctor, not the insurer, who should be and is making medical decisions and who is actually treating the patient.

The Republican plan guarantees nothing other than assistance for low income seniors. Prescription drugs, however, are not just a low income problem. Seniors who thought they

were financially secure are watching their savings go straight into the pockets of drug makers. Some of my colleagues are trying to tell seniors that there will be a choice of reliable, affordable private prescription drug insurance plans available to them. Based on what? Certainly not history. Even the insurance industry is balking at the idea. It says something that insurers do not sell prescription drug coverage on a stand-alone basis today, even to young and to healthy individuals. That is because it does not make sense.

Medicare is reliable. Medicare is a large enough insurance program to accommodate the risks associated with prescription drug coverage. Individual stand-alone prescription drug policies are not.

Some in this body are actually trying to convince seniors who stand firmly behind Medicare that expanding the current benefit package is less efficient, more onerous, than manufacturing a new bureaucracy, as the Republican plan does, and conjuring up a new insurance market. Seniors are simply too smart for that.

I do not want to ask seniors in my district and across the country to rely on a market that does not want the business to provide a benefit not suited to stand-alone coverage to a population that, let us face it, has never been served well by the private insurance market.

I do not want seniors in my district and across the country to be coerced into managed care plans in order to avoid dealing with three different insurance plans, with Medicare, with Medigap and with individual prescription drug coverage.

I do not want seniors in my district or across the country to receive a letter from their employer telling them that their retiree prescription drug coverage has been terminated on the premise, quote, that the government is offering private insurance now.

I do not want to forsake volume discounts and economies of scale by segmenting the largest purchasing pool in this country, and then waste trust fund dollars on insurance company margins, on insurance company market expenses, on insurance company huge executive salaries.

I do not think the individual health insurance market is a reasonable model for Medicare prescription drug benefits. In fact, as anyone who has had to purchase or sale coverage in that market knows the individual health insurance market is not even a good model for individual health insurance. It is the poster child for selection problems, for rate spirals and for insurance scams.

The very fact that the drug industry backs Citizens for a Better Medicare supports the private plan approach is a giant strike against it. The drug industry and their puppet organization clearly feel that undercutting seniors' collective purchasing power, relegating

seniors to private stand-alone prescription drug plans, is the key, underscore this, is the key to preserving discriminatory monopolistically set outrageously high prices.

Mr. Speaker, I hope that Members of this Congress read the fine print when we decide these Medicare prescription drug bills.

#### RESOLUTION OF KASHMIR ISSUE MUST INCLUDE THE KASHMIRI PANDITS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 19, 1999, the gentleman from New Jersey (Mr. PALLONE) is recognized during morning hour debates for 5 minutes.

Mr. PALLONE. Mr. Speaker, in recent years the United States and the world community have been forced to confront the need for a resolution of the conflict in Kashmir. This conflict in the Himalayan Mountains has for decades poisoned relations between India and Pakistan.

The conflict has also poisoned life within Kashmir itself. People from all ethnic and religious groups have suffered from the violence, be they Hindu, Muslim or Sikh, but the most forgotten victims have been the Pandits.

Recently, it was reported by the Indo-American Kashmir forum that Karl Inderfurth, the U.S. Assistant Secretary of State for South Asia, reiterated the view that Pandits should not be ignored in upcoming discussions of the Kashmir issue. In a meeting with the National Advisory Council on South Asia at the State Department earlier this month, Mr. Inderfurth acknowledged that the U.S. has not always mentioned the Pandits in its statements on the Kashmir, but assured the Council that the displaced status of the Pandits is a matter of concern to the United States.

As a U.S. official who has frequently sought to give more attention to the plight of the Pandits, I am encouraged by Mr. Inderfurth's recent statement. I will urge our State Department to continue to draw attention to the suffering that the Pandits have endured and continue to endure in its statements on the Kashmir issue.

I have also called for the U.N. and international organizations to devote greater attention to what I consider a case of ethnic cleansing that is afflicting the Kashmiri Pandit community.

Mr. Speaker, India's Prime Minister Vajpayee has indicated that his government would be willing to meet with Kashmiri groups to address their concerns but the prime minister has stressed that Pakistan should not have any role in this dialogue, which is in fact an internal matter for India.

Some of these separatist elements within Kashmir, the same organizations involved in the terrorism that has uprooted the Pandit community, are clearly working to promote greater Pakistani involvement in this process.